

Notice No. <u>659</u>

Dated: 08.02.2024

With reference to the letter No. **AMG(Br.)OE/Med.Seat/AMA/2023-24/Vol-V/634**, dated 25.01.2024 of "Office of the Accountant General (Audit-II), Puri (Odisha)". All the employees of Regular Establishment (Teaching and Non-Teaching) of this Campus are requested to submit the dependent list of their family members in the Office on or before 14-02-2024, so that the issue of availing CGHS facilities by the Central Government Employees in Puri town would be addressed at the appropriate level.

The prescribed proforma is attached herewith.



Copy for information and necessary action to:

- 1. All regular staff members (Teaching and Non-Teaching) of CSU, SSC, Puri.
- 2. Notice Book.
- 3. Campus Website.
- 4. M-17 File.

<u>Proforma</u>

DECLARATION FOR THE PURPOSE OF REIMBURSEMENT OF MEDICAL CLAIMS

1.	Name & Designation of the Government Servant:	:
2.	Name of Parents: 1) Father	:
	2)Mother	:
3.	Normal residence of the parents in details with Lane/Place/etc. 3) Father	:
4	4) Mother	
4.	Monthly income & source of income of the parents	:
	3) Father	
	4) Mother	

List of family members i.e. Wife/Husband and Children					
SI. No.	Name	Relation with government Servant	Age as on 01.01.2023 (i/r/o Children only	Normal Residence of Wife/Husband & Children	
1					
2					
3					
4					
5					
6					

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Signature of the Government Servant